

## **Application Data Sheet**

### **Application Information**

Application Type::	Regular
Subject Matter::	Utility
CD-ROM or CD-R::	None
Title::	Pharmacological Vitreolysis
Attorney Docket Number::	113476.122
Request for Early Publication?::	No
Request for Non Publication?::	No
Suggested Drawing Figure::	7
Total Drawing Sheets::	14
Small Entity?::	Yes
Petition Included?::	No
Secrecy Order in Parent Application?::	No

### **Applicant Information**

Applicant Authority Type:	Inventor
Primary Citizenship Country::	US
Status::	Full Capacity
Given Name::	Steve
Family Name::	Pakola
Name Suffix::	M.D.
City of Residence::	New York
State or Province of Residence::	New York
Street of mailing address::	c/o ThromboGenics Ltd., 500 7 <sup>th</sup> Avenue
Street of mailing address::	10 <sup>th</sup> Floor, Building B
City of mailing address:	New York
State or Province of mailing address::	New York
Country of mailing address::	United States of America

Postal or Zip Code of mailing address:: 10018

Applicant Authority Type: Inventor  
Primary Citizenship County:: The Netherlands and Canada  
Status:: Full Capacity  
Given Name:: Marc  
Family Name:: De Smet  
City of Residence:: Amstelveen  
Street of mailing address:: Branding 6  
City of mailing address: Amstelveen  
Country of mailing address:: The Netherlands  
Postal or Zip Code of mailing address:: 1186 DH

#### **Correspondence Information**

Correspondence Customer Number:: 23483

#### **Representative Information**

Representative Customer Number:: 23483

#### **Domestic Priority Information**

#### **Foreign Priority Information**

<b>Country::</b>	<b>Application Number::</b>	<b>Filing Date::</b>	<b>Priority Claimed::</b>
United Kingdom	GB 0228409.9	December 6, 2002	Yes

## **Assignment Information**

Assignee Name::	Thromb-X NV
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City of mailing address::	Leuven
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